

Application Form for VET (TAFE) Programs

EMAIL info@federation.edu.au | CALL 1800 333 864 | WEB federation.edu.au

Program Information

www.federation.edu.au/future-students or Student Recruitment at info@federation.edu.au or 1800 FED UNI.

Before completing this form, please check the application method, closing dates, entry requirements and extra requirements for your preferred program. This information can all be found at: study.federation.edu.au

1. Previous applications and/or enrolment

Have you previously applied to, or been enrolled at, FedUni?	<input type="radio"/> Yes <input type="radio"/> No
If yes, please state FedUni Student ID number (if known)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Has your name changed since your last enrolment?	<input type="radio"/> Yes <input type="radio"/> No
If yes, previous name:	<input type="text"/>

2. Biographical (personal) details

Title	<input type="radio"/> Mr <input type="radio"/> Ms <input type="radio"/> Mrs <input type="radio"/> Miss <input type="radio"/> Dr <input type="radio"/> Other:
First name	<input type="text"/>
Other name	<input type="text"/>
Family name	<input type="text"/>
Date of birth	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Gender <input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Other
Country of birth	<input type="radio"/> Australia <input type="radio"/> Other (please specify): <input type="text"/>

3. Home address

Building/Property	<input type="text"/>
Unit number	<input type="text"/> Street number <input type="text"/>
Street name	<input type="text"/>
Suburb/Town	<input type="text"/>
State / Territory	<input type="text"/> Post code <input type="text"/>
Telephone: Home	<input type="text"/> <input type="radio"/> Preferred
Telephone: Work	<input type="text"/> <input type="radio"/> Preferred
Telephone: Mobile	<input type="text"/> <input type="radio"/> Preferred
Email	<input type="text"/>

4. Mailing (postal) address

Building/Property	<input type="text"/>
Unit number	<input type="text"/> Street number <input type="text"/>
Street name	<input type="text"/>
PO Box or Road Side Delivery (RSD) box number	<input type="text"/>
Suburb/Town	<input type="text"/>
State / Territory	<input type="text"/> Post code <input type="text"/>

Notes:

Including: University of Ballarat; Ballarat University College; Ballarat College of Advanced Education; School of Mines and Industries, or Wimmera Institute of TAFE

If **Yes**, you **must** provide documentary evidence (Marriage Certificate, Deed Poll or Statutory Declaration) to support the change

Your first **legal** given name

Your other legal name

Your **legal** family name/surname

Please provide the **physical address** of where you **usually live** – street number and name **not post office box**. **Do not** provide any **temporary address** at which you reside for training, work or other purposes before returning to your home. If you are from a rural area use the address from your state or territory's 'rural property addressing' or 'numbering' system as your residential street address.

Please tick your preferred contact number.

Please provide the email address you check most regularly.

If different from your home address above

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Authorised by: Manager, Student HQ
Document Owner: University Registrar
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Original Issue: 20/08/2014
Current Version: 09/01/2018
Review Date: 01/07/2018

5. Are you of Aboriginal or Torres Strait Islander origin?

- No**
 Yes, Aboriginal
 Yes, Torres Strait Islander
 Yes, both Aboriginal and Torres Strait Islander

Notes:

Please tick one box only

6. What is your citizenship status?

- Australian Citizen
 New Zealand Citizen
 Overseas Resident
 Permanent Humanitarian Visa
 Permanent Non-Humanitarian Visa
 Permanent Visa Holder

Please tick one box only

7. Post-secondary education

List all academic qualification/s previously attempted or completed

Year started	Year completed	Name of institution	Name of qualification	State	Successful completion?
					<input type="radio"/> Yes <input type="radio"/> No
					<input type="radio"/> Yes <input type="radio"/> No
					<input type="radio"/> Yes <input type="radio"/> No
					<input type="radio"/> Yes <input type="radio"/> No

8. Program information

First preference, program name:		Year of commencement	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Second preference, program name:			

Students with a disability or chronic medical condition

The University provides a range of support services for students with a disability or chronic medical condition. Early contact will help enable the University to organize appropriate services prior to the commencement of your program. For information and/or support please contact the Student Support Reception on: 03 5327 9470.

Admission for Australian Aboriginal and Torres Strait Islander people

Federation University Australia has a genuine commitment to Aboriginal and Torres Strait Islander issues as evidenced by its Statement on Reconciliation, Indigenous Employment Strategy and Aboriginal Education Centre that provides educational, cultural and personal support to Aboriginal and Torres Strait Islander students. Aboriginal and Torres Strait Islander people who are unable to meet admission requirements are able to seek consideration of their personal circumstances. Applications are considered on an individual basis which may involve an interview. For more information about admissions and/or support on a range of issues please contact the Aboriginal Education Centre on 03 5327 9795.

Privacy statement

The information being sought in this form is collected for the purpose of processing your application. The information will be held by the University and may be accessed and used by people employed or engaged by the University in the delivery of services to you. The information may be used or disclosed to organisations outside the University where permitted by relevant Privacy Legislation. The provisions of the information is voluntary, but if this information is not provided, the University may be unable to process your enrolment. You have a right of access to, and correction of, your personal information in accordance with Privacy Legislation and the University's Information Privacy Policy. Please direct any enquires you may have in relation to this matter to the University's Privacy Officer, telephone (03 5327 9021).

Applicant's declaration

I declare that all information submitted is correct and complete.
I acknowledge that the provision of incorrect information may result in the withdrawal by the University of any place that may be offered.

Applicant's Signature	Date	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
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Please return this completed application form by mail or email to the following addresses. Alternatively, deliver it in person to Student HQ, SMB Campus or Horsham Campus.

Student HQ, SMB Campus

Email: info@federation.edu.au
Post: Student HQ, SMB Campus
Federation University Australia
PO Box 668 BALLARAT VIC 3353
Telephone: 1800 333 864

Student HQ, Horsham Campus

Email: info@federation.edu.au
Post: Student HQ, Horsham Campus
Federation University Australia
PO Box 300 HORSHAM VIC 3402
Telephone: 1800 333 864

Office Use Only

Application Centre:	Admit Type: eg. DOM	<input type="text"/> <input type="text"/> <input type="text"/>
FedUni (Direct application)	Admit Term: eg.1401	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

National Program ID:

Data entry by
(please print name)

Please tick	<input type="radio"/> School <input type="radio"/> Student HQ	Date	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
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Applicant ID

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